

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

Serial No.  
10/584,393  
Filing Date  
Applicant(s)

CLAIMS

	AS FILED		AFTER IN AMENDMENT		AFTER OUT AMENDMENT			AS FILED		AFTER IN AMENDMENT		AFTER OUT AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	1						51					
2		1						52					
3		2						53					
4		2						54					
5		2						55					
6		2						56					
7		2						57					
8		2						58					
9		0						59					
10		0						60					
11		0						61					
12		0						62					
13		0						63					
14		0						64					
15		0						65					
16		0						66					
17		0						67					
18		0						68					
19								69					
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43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	1	↓			↓				↓				
TOTAL DEP.	23	←			←				↓				
TOTAL CLAMS	24								←				

LEO J. AVAILABLE COPY